



KANSAS CORPORATION COMMISSION 1061522
OIL & GAS CONSERVATION DIVISION

Form ACO-1

June 2009

Form Must Be Typed

Form must be Signed

All blanks must be Filled

WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
---	---

CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method: Flowing Pumping Gas Lift Other (Explain) _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
-----------------------------------	-----------	---------	-------------	---------------	---------

DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <i>(Submit ACO-4)</i> <input type="checkbox"/> Other (Specify) _____	PRODUCTION INTERVAL: _____ _____
---	---	--

Form	ACO1 - Well Completion
Operator	Lotus Operating Company, L.L.C.
Well Name	Molz 'L' 1
Doc ID	1061522

All Electric Logs Run

Dual Induction
Neutron Density w/PE
Micro
Sonic



PO BOX 31 Russell, KS 67665

Voice: (785) 483-3887
 Fax: (785) 483-5566

INVOICE

Invoice Number: 127056
 Invoice Date: Apr 29, 2011
 Page: 1

Bill To:
 Lotus Operating Co., LLC
 Lotus Exploration Co.
 100 S. Main, STE 420
 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

RECEIVED

MAY - 7 2011

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Molz L #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-01	Medicine Lodge	Apr 29, 2011	5/29/11

Quantity	Item	Description	Unit Price	Amount
135.00	MAT	Class A Common	16.25	2,193.75
90.00	MAT	Pozmix	8.50	765.00
4.00	MAT	Gel	21.25	85.00
7.00	MAT	Chloride	58.20	407.40
236.00	SER	Handling	2.25	531.00
15.00	SER	Mileage 236 sx @.11 per sk per mi	25.96	389.40
1.00	SER	Surface	1,125.00	1,125.00
30.00	SER	Pump Truck Mileage	7.00	210.00
30.00	SER	Light Vehicle Mileage	4.00	120.00
1.00	CEMENTER	Matt Thimesch		
1.00	EQUIP OPER	Ron Gilley		
1.00	CEMENTER	Bobby Whiteside		

ENTERED
 MAY 10 2011

GL# 9207
 DESC. CEMENT SURF
CSG #1
 WELL # MolzL

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 1165.31

ONLY IF PAID ON OR BEFORE
May 24, 2011

Subtotal	5,826.55
Sales Tax	251.93
Total Invoice Amount	6,078.48
Payment/Credit Applied	
TOTAL	6,078.48

- 1165.31
4913.17

ALLIED CEMENTING CO., LLC. 040152

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Med. Lotus #18

DATE <i>4-29-11</i>	SEC. <i>2</i>	TWP. <i>35S</i>	RANGE <i>12W</i>	CALLED OUT	ON LOCATION	JOB START <i>7:30 pm</i>	JOB FINISH <i>8:30 pm</i>
LEASE <i>Molz L</i>		WELL # <i>1</i>		LOCATION <i>Ortwood Rd. 1/2 W 5/5</i>		COUNTY <i>Barber</i>	STATE <i>KS</i>
OLD OR <input checked="" type="radio"/> NEW (Circle one)							

CONTRACTOR *Diller #2*
 TYPE OF JOB *Surface*
 HOLE SIZE *14 3/4* T.D. *283'*
 CASING SIZE *10 7/8* DEPTH *282'*
 TUBING SIZE DEPTH
 DRILL PIPE DEPTH
 TOOL DEPTH
 PRES. MAX *300 psi* MINIMUM
 MEAS. LINE SHOE JOINT
 CEMENT LEFT IN CSG. *20'*
 PERFS.
 DISPLACEMENT *2 5/2 bbls*

OWNER *Lotus Operating*
 CEMENT
 AMOUNT ORDERED *225 sk 60:40:3 1/2 cc + 2% gal*

COMMON <i>Class A</i>	<i>135 sk @ 16.25</i>	<i>2193.75</i>
POZMIX	<i>90 sk @ 8.50</i>	<i>765.00</i>
GEL	<i>4 sk @ 21.25</i>	<i>85.00</i>
CHLORIDE	<i>7 sk @ 58.20</i>	<i>407.40</i>
ASC	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
	@	
HANDLING <i>236</i>	@ <i>2.25</i>	<i>531.00</i>
MILEAGE <i>215.4/236</i>		<i>389.40</i>
TOTAL		<i>4371.55</i>

EQUIPMENT

PUMP TRUCK CEMENTER *Matt Thomas*
 # *352* HELPER *Ron Gilroy*
 BULK TRUCK
 # *364* DRIVER *Bobby Whiteside*
 BULK TRUCK
 # DRIVER

REMARKS:

*Back site with Rig
 pump 3 bbls H2O
 mix 225 sk cement
 disp 2 5/2 bbls H2O
 shut in
 cement disk circulate*

SERVICE

DEPTH OF JOB *282'*
 PUMP TRUCK CHARGE *1125.00*
 EXTRA FOOTAGE @
 MILEAGE *30 @ 7.00* *210.00*
 MANIFOLD @
Light Vehicle 30 @ 4.00 *120.00*
 @

CHARGE TO: *Lotus Operating*
 STREET
 CITY STATE ZIP

TOTAL *1455.00*

PLUG & FLOAT EQUIPMENT

@
 @
 @
 @
 @

TOTAL *0*

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

SALES TAX (If Any)
 TOTAL CHARGES *[scribble]*
 DISCOUNT IF PAID IN 30 DAYS *[scribble]*

PRINTED NAME
 SIGNATURE *John J. Armbruster*



PO BOX 31 Russell, KS 67665

RECEIVED

MAY 20 2011

INVOICE

Invoice Number: 127213

Invoice Date: May 8, 2011

Page: 1

Voice: (785) 483-3887

Fax: (785) 483-5566

Bill To:

Lotus Operating Co., LLC
 Lotus Exploration Co.
 100 S. Main, STE 420
 Wichita, KS 67202

Federal Tax I.D.#: 20-5975804

Customer ID	Well Name# or Customer P.O.	Payment Terms	
Lotus	Molz L #1	Net 30 Days	
Job Location	Camp Location	Service Date	Due Date
KS1-02	Medicine Lodge	May 8, 2011	6/7/11

Quantity	Item	Description	Unit Price	Amount
21.00	MAT	Class A Common	16.25	341.25
14.00	MAT	Pozmix	8.50	119.00
2.00	MAT	Gel	21.25	42.50
200.00	MAT	ASC Class A	19.00	3,800.00
94.00	MAT	PL-160	17.20	1,616.80
1,000.00	MAT	Kol Seal	0.89	890.00
50.00	MAT	Flo Seal	2.70	135.00
295.00	SER	Handling	2.25	663.75
15.00	SER	Mileage 295 sx @ .11 per sk per mi	32.45	486.75
1.00	SER	Production Casing	2,695.00	2,695.00
30.00	SER	Pump truck Mileage	7.00	210.00
1.00	SER	Head Rental	200.00	200.00
30.00	SER	Light Vehicle Mileage	4.00	120.00
1.00	EQP	5.5 Rubber Plug	66.00	66.00
1.00	EQP	5.5 Guide Shoe	178.00	178.00
1.00	EQP	5.5 AFU Insert	155.00	155.00
1.00	EQP	5.5 Basket	228.00	228.00
5.00	EQP	5.5 Centralizer	49.00	245.00
1.00	CEMENTER	Darin Franklin		
1.00	EQUIP OPER	Ron Gilley		
1.00	EQUIP OPER	Raymond Romans		

ENTERED
MAY 25 2011

GL# 9308
 DESC. Cement in prod
Casing #1
 WELL # Molz L

ALL PRICES ARE NET, PAYABLE
 30 DAYS FOLLOWING DATE OF
 INVOICE. 1 1/2% CHARGED
 THEREAFTER. IF ACCOUNT IS
 CURRENT, TAKE DISCOUNT OF

\$ 2438.41

ONLY IF PAID ON OR BEFORE
Jun 2, 2011

Subtotal	12,192.05
Sales Tax	570.61
Total Invoice Amount	12,762.66
Payment/Credit Applied	
TOTAL	12,762.66

- 2438.41
10,324.25

ALLIED CEMENTING CO., LLC. 040194

Federal Tax I.D.# 20-5975804

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT:
Medicine Lodge KS

DATE <u>5-8-2011</u>	SEC. <u>2</u>	TWP. <u>35s</u>	RANGE <u>12W</u>	CALLED OUT <u>6:00 AM</u>	ON LOCATION <u>8:30 AM</u>	JOB START <u>11:00 PM</u>	JOB FINISH <u>5:00 PM</u>
LEASE <u>moiz L</u>		WELL # <u>1</u>		LOCATION <u>Medicine Lodge ks Sourn on</u>		COUNTY <u>Borthor</u>	STATE <u>KS</u>
OLD OR <u>(NEW)</u> (Circle one)			<u>281 to Driftway, 1/2 W, SE 1/4</u>				

CONTRACTOR Duke # 2
 TYPE OF JOB Production
 HOLE SIZE 7 7/8 T.D. 5407'
 CASING SIZE 5 1/2 DEPTH 5272'
 TUBING SIZE _____ DEPTH _____
 DRILL PIPE _____ DEPTH _____
 TOOL _____ DEPTH _____
 PRES. MAX _____ MINIMUM _____
 MEAS. LINE _____ SHOE JOINT 45'
 CEMENT LEFT IN CSG. _____
 PERFS. _____
 DISPLACEMENT 129 bbls of fresh water

EQUIPMENT


PUMP TRUCK CEMENTER Dern F
 # 471-265 HELPER Ron G
 BULK TRUCK _____
 # 364 DRIVER Raymond R
 BULK TRUCK _____
 # _____ DRIVER _____

REMARKS:

Pipe on bottom & break circulation, mix 2.5s cement for R+hole, mix 10s for mouse hole, mix 200s of cement, shut down, wash pump & lines, Release plug, start displacement L: & pressure at 72 bbls, slow rate to 3bpm @ 120 bbls, Bump plug @ 129 bbls 1000-1500 psi, flow did hold

CHARGE TO: Lotus Operating
 STREET _____
 CITY _____ STATE _____ ZIP _____

To Allied Cementing Co., LLC.
 You are hereby requested to rent cementing equipment and furnish cementer and helper(s) to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read and understand the "GENERAL TERMS AND CONDITIONS" listed on the reverse side.

PRINTED NAME Robin Brown
 SIGNATURE 

Thank you!!!

OWNER Lotus Operating

CEMENT
 AMOUNT ORDERED 35s x 60' 40' 4 9/16 G01
200s x Class A ASC + 5# K01ses1
+ 5% FL160 + 1/4# Floses1

COMMON <u>A</u>	<u>21 sx</u>	@ <u>16.25</u>	<u>341.25</u>
POZMIX	<u>14 sx</u>	@ <u>8.50</u>	<u>119.00</u>
GEL	<u>2 sx</u>	@ <u>21.25</u>	<u>42.50</u>
CHLORIDE		@	
ASC	<u>200 sx</u>	@ <u>19.00</u>	<u>3800.00</u>
<u>Fl-160</u>	<u>94 #</u>	@ <u>17.20</u>	<u>1616.80</u>
<u>K01seal</u>	<u>1000 #</u>	@ <u>.89</u>	<u>890.00</u>
<u>Fl0seal</u>	<u>50 #</u>	@ <u>2.70</u>	<u>135.00</u>
		@	
		@	
		@	
		@	
HANDLING	<u>295</u>	@ <u>2.25</u>	<u>663.75</u>
MILEAGE	<u>295/15/.11</u>		<u>486.75</u>
TOTAL			<u>8095.05</u>

SERVICE

DEPTH OF JOB	<u>5272'</u>		
PUMP TRUCK CHARGE	<u>2695.00</u>		
EXTRA FOOTAGE		@	
MILEAGE	<u>30</u>	@ <u>7.00</u>	<u>210.00</u>
MANIFOLD		@	
	<u>Hose rental</u>	@	<u>200.00</u>
	<u>light vehicle</u>	@ <u>4.00</u>	<u>120.00</u>
TOTAL			<u>3225.00</u>

PLUG & FLOAT EQUIPMENT

	<u>5 1/2</u>		
1- Rubber plug		@	<u>66.00</u>
1- Guide shoe		@	<u>178.00</u>
1- AFU Insert		@	<u>155.00</u>
1- Bssket		@	<u>228.00</u>
5- Conrs1, 2ers		@ <u>49.00</u>	<u>245.00</u>
TOTAL			<u>872.00</u>

SALES TAX (If Any) _____
 TOTAL CHARGES ~~8095.05~~
 DISCOUNT _____ IF PAID IN 30 DAYS ~~8095.05~~

Conservation Division
Finney State Office Building
130 S. Market, Rm. 2078
Wichita, KS 67202-3802



Phone: 316-337-6200
Fax: 316-337-6211
<http://kcc.ks.gov/>

Mark Sievers, Chairman
Ward Loyd, Commissioner
Thomas E. Wright, Commissioner

Sam Brownback, Governor

August 23, 2011

Tim Hellman
Lotus Operating Company, L.L.C.
100 S MAIN STE 420
WICHITA, KS 67202-3737

Re: ACO1
API 15-007-23690-00-00
Molz 'L' 1
NE/4 Sec.01-35S-12W
Barber County, Kansas

Dear Production Department:

We are herewith requesting that the Well Completion Form ACO-1 and attached information for the subject well be held confidential for a period of two years.

Should you have any questions or need additional information regarding subject well, please contact our office.

Respectfully,
Tim Hellman



Weatherford[®]

Completion Systems

DRILL STEM TEST REPORT

Prepared For: **Lotus Operating Co.LLC**

100 S.Main, Ste.420
Wichita Ks.67202

ATTN: Tim Hellman

1-35s-12w Barber Ks

Molz L#1

Start Date: 2011.05.06 @ 09:27:03

End Date: 2011.05.06 @ 18:16:33

Job Ticket #: 37464 DST #: 1

ALPINE OIL SERVICES CORPORATION
2460, 240 - 4 Avenue S.W. Calgary, AB. T2P 4H4
ph: 263-7800 fax: 264-7260



Weatherford[®] Completion Systems

DRILL STEM TEST REPORT

Lotus Operating Co.LLC

Molz L#1

100 S.Main, Ste.420
Wichita Ks.67202

1-35s-12w Barber Ks

ATTN: Tim Hellman

Job Ticket: 37464

DST#: 1

Test Start: 2011.05.06 @ 09:27:03

GENERAL INFORMATION:

Formation: **Misener**

Deviated: No Whipstock: ft (KB)

Time Tool Opened: 11:45:03

Time Test Ended: 18:16:33

Test Type: Conventional Bottom Hole

Tester: Gary Pevoteaux

Unit No: 56

Interval: 5129.00 ft (KB) To 5160.00 ft (KB) (TVD)

Reference Elevations: 1423.00 ft (KB)

Total Depth: 5160.00 ft (KB) (TVD)

1415.00 ft (CF)

Hole Diameter: 7.88 inches Hole Condition: Fair

KB to GR/CF: 8.00 ft

Serial #: 8167 Inside

Press @ RunDepth: 716.93 psig @ 5130.00 ft (KB)

Capacity: 8000.00 psig

Start Date: 2011.05.06 End Date: 2011.05.06

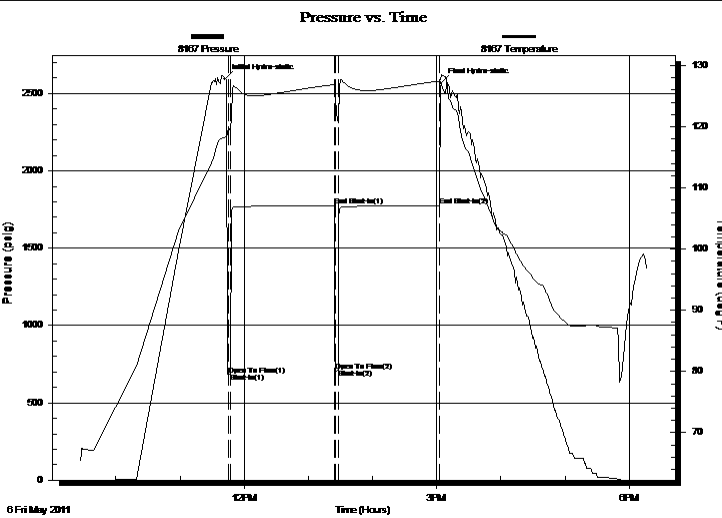
Last Calib.: 2011.05.06

Start Time: 09:27:08 End Time: 18:16:33

Time On Btm: 2011.05.06 @ 11:42:03

Time Off Btm: 2011.05.06 @ 15:04:03

TEST COMMENT: IF: Strong blow . GTS in 70 secs.
IS: Strong blow . B.O.B.
FF: Strong blow . Flow rate of 1,391 Mcf/d and gaining @ 4 mins
(34 psi behind 1" choke)



PRESSURE SUMMARY

Time (Min.)	Pressure (psig)	Temp (deg F)	Annotation
0	2596.11	118.28	Initial Hydro-static
3	676.77	119.92	Open To Flow (1)
6	694.37	119.50	Shut-In(1)
102	1774.21	126.91	End Shut-In(1)
104	704.35	124.73	Open To Flow (2)
106	716.93	120.63	Shut-In(2)
201	1775.05	127.48	End Shut-In(2)
202	2569.95	128.50	Final Hydro-static

Recovery

Length (ft)	Description	Volume (bbl)
65.00	GOCM 53%g 17%o 30%m	0.91
310.00	CGO 8%g 92%o	4.35

Gas Rates

	Choke (inches)	Pressure (psig)	Gas Rate (Mcf/d)
First Gas Rate	1.00	34.00	1391.44



Weatherford
Completion Systems

DRILL STEM TEST REPORT

FLUID SUMMARY

Lotus Operating Co.LLC

Molz L#1

100 S.Main, Ste.420
 Wichita Ks.67202

1-35s-12w Barber Ks

Job Ticket: 37464

DST#: 1

ATTN: Tim Hellman

Test Start: 2011.05.06 @ 09:27:03

Mud and Cushion Information

Mud Type: Gel Chem

Cushion Type:

Oil API:

45.2 deg API

Mud Weight: 9.00 lb/gal

Cushion Length:

ft

Water Salinity:

6000 ppm

Viscosity: 52.00 sec/qt

Cushion Volume:

bbbl

Water Loss: 11.98 in³

Gas Cushion Type:

Resistivity: 0.00 ohm.m

Gas Cushion Pressure:

psig

Salinity: 6000.00 ppm

Filter Cake: 0.20 inches

Recovery Information

Recovery Table

Length ft	Description	Volume bbl
65.00	GOCM 53%g 17%o 30%m	0.912
310.00	CGO 8%g 92%o	4.348

Total Length: 375.00 ft

Total Volume: 5.260 bbl

Num Fluid Samples: 0

Num Gas Bombs: 1

Serial #: gp-1

Laboratory Name:

Laboratory Location:

Recovery Comments:



Weatherford[®]
Completion Systems

DRILL STEM TEST REPORT

GAS RATES

Lotus Operating Co.LLC

Molz L#1

100 S.Main, Ste.420
Wichita Ks.67202

1-35s-12w Barber Ks

ATTN: Tim Hellman

Job Ticket: 37464

DST#: 1

Test Start: 2011.05.06 @ 09:27:03

Gas Rates Information

Temperature: 59 deg C
Relative Density: 0.65
Z Factor: 0.8

Gas Rates Table

Flow Period	Elapsed Time	Choke (mm)	Pressure (kPaa)	Gas Rate (m ³ /d)
2	4	1.00	34.00	1391.44

